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Revision: HCFA-PM- 91-10 (MB)
DECEMBER 1991

State/Territory: Maine

Citation 42 CFR 431.60 42 CFR 456.2 50 FR 15312 1902(a)(30)(C) and 1902(d) of the Act, P.L. 99-509 (Section 9431)

4.14 <u>Utilization/Quality Control</u>

(a) A Statewide program of surveillance and utilization control has been implemented that safeguards against unnecessary or inappropriate use of Medicaid services available under this plan and against excess payments, and that assesses the quality of services. The requirements of 42 CFR Part 456 are met:

X Directly

By undertaking medical and utilization review requirements through a contract with a Utilization and Quality Control Peer Review Organization (PRO) designated under 42 CFR Part 462. The contract with the PRO--

- (1) Meets the requirements of §434.6(a);
- (2) Includes a monitoring and evaluation plan to ensure satisfactory performance;
- (3) Identifies the services and providers subject to PRO review;
- (4) Ensures that PRO review activities are not inconsistent with the PRO review of Medicare services; and
- (5) Includes a description of the extent to which PRO determinations are considered conclusive for payment purposes.
- Quality review requirements described in section 1902(a)(30)(C) of the Act relating to services furnished by HMOs under contract are undertaken through contract with the PRO designed under 42 CFR Part 462.
- By undertaking quality review of services furnished under each contract with an HMO through a private accreditation body.

1902(a)(30)(C) and 1902(d) of the Act, P.L. 99-509 (section 9431)

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JULY 1985	HCFA-PH-85-/	(BERC)	OMB BO.:	0338-013
10L1 1983	State/Territory:		MAINE	
Citation 42 CFR 456 50 PR 153		of of	e Medicaid agency meets the requirement 42 CFR Part 456, Subpart D, for contutilization of impatient services in spitals.	rol
			/ Utilization and medical review are performed by a Utilization and Qual Control Fear Review Organization de under 42 CFR Part, 462 that has a cowith the agency to perform those re-	signated ntract
			/ Utilization review is performed in accordance with 42 CFR Part 456, Sulthat specifies the conditions of a confittee of the requirements of Subpart D for	waiver
	•		// All nental hospitals. // Those specified in the waiver.	
			/ No waivers have been granted.	
			t applicable. Inpatient services in a	

6 No. <u>\$7-9</u> Cuperrades 78 No. 85-14

Approved Date 11-5-87 Effective Date 9-1-87

HOFA ID: 0048P/0002P

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Revision: MAY 1985	HCFA-PM-85-3	(BERC)
	State:	MAINE
		OMB NO. 0938-0193
<u>Citation</u> 42 CFR 456 50 FR 1531	- -	(d) The Medicaid agency meets the requirements of 42 CFR Part 456, Subpart E, for the control of utilization of skilled nursing facility services.
		// Utilization and medical review are performed by a Utilization and Quality Control Peer Review Organization designated under 42 CFR Part 462 that has a contract with the agency to perform those reviews.
	-	// Utilization review is performed in accordance with 42 CFR Part 456, Subpart H, that specifies the conditions of a waiver of the requirements of Subpart E for:
		// All skilled nursing facilities.
		// Those specified in the waiver.
		/ X No waivers have been granted.

TN No. 85-12 Supersedes TN No. none

Approval Date 20 AUG 1985

Effective Date _

1 APR 1985

HCFA-PM-85-3 (BERC) Revision: **MAY 1985** Maine State: OMB NO.: 0938-0193 The Medicaid agency meets the requirements of 42 Citation 4.14 (e) 42 CFR 456.2 CFR Part 456, Subpart F, for control of the utilization 50 FR 15312 of intermediate care facility services. Utilization review in facilities is provided through: Facility-based review. Direct review by personnel of the medical assistance unit of the State agency. Personnel under contract to the medical assistance unit of the State agency. Utilization and Quality Control Peer Review Organizations. Another method as described in ATTACHMENT 4.14-A. Two or more of the above methods. ATTACHMENT 4.14.-B describes the circumstances under which each method is

used.

are not provided under this plan.

TN No.

Supersedes

Approval Date: 6/11/96

Effective Date:

Not applicable. Intermediate care facility services

1/1/96

TN No. 85-12

HCFA ID: 0048P/0002P

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Revision: HCFA-PM- 91-10 (MB)
DECEMBER 1991

State/Territory:	Maine	
Citation 4.14	Utilization/Quality Control (Continued)	
1902(a)(30) and 1902(d) of the Act, P.L. 99-509 (Section 9431) P.L. 99-203 (section 4113)	(f) The Medicaid agency meets the requirements section 1902(a)(30) of section 1902(a)(30) the Act for control of the assurance of qualifurnished by each health maintenance organization under contract with the Medica agency. Independent, external quality review are performed annually by:	oi ity
	A Utilization and Quality Control Per Review Organization designated under CFR Part 462 that has a contract with the agency to perform those reviews.	42
	A private accreditation body.	
	An entity that meets the requirements the Act, as determined by the Secretar	
•	The Medicaid agency certifies that the enti in the preceding subcategory under 4.14(f) not an agency of the State.	ity is